

City of San Marcos
City Council/Council Appointee
Annual Financial Disclosure Form

City Clerk

APR 28 2017

Notes: 1. This report covers the reporting period from January 1, 2016 to December 31, 2016.
2. Attach information on additional pages if necessary.

Name: Ed Mihalcanin

Residence address: 517 West Hopkins Street
SAN MARCOS TEXAS 78666

City of San Marcos

Title of position held with the City: CITY COUNCIL MEMBER PLACE 3

Name of spouse (if applicable): NONE

Names of all dependent children (if applicable): NONE

Names under which you, your spouse, or any of your dependent children do business:

1. NONE

2. "

3. "

Note – You may use the following reporting categories to describe amounts and values:

- | | |
|---------------------------|---|
| (1) Category I – | At least \$100.00 but less than \$10,000.00 |
| (2) Category II – | At least \$10,000.00 but less than \$20,000.00 |
| (3) Category III – | At least \$20,000.00 but less than \$50,000.00 |
| (4) Category IV – | At least \$50,000.00 but less than \$75,000.00 |
| (5) Category V – | At least \$75,000.00 but less than \$100,000.00 |
| (6) Category VI – | \$100,000.00 or more - report to nearest \$100,000. |

1. Identify each source of income amounting to more than \$100.00 received in the reporting period by you, your spouse, or any of your dependent children:

Name, address of income source	Nature of income (e.g., salary, dividends, rent, etc.)	Amount of income (by reporting category)	Income of (self, spouse, or dependent child)
TEXAS STATE UNIVERSITY COLLEGE DR. SAN MARCOS TX 78666	SALARY	IV	SELF

2. Identify each option held, owned, acquired or sold by you, your spouse, or any of your dependent children during the reporting period:

Nature of option (real estate, stock, etc.)	Amount of transaction (by reporting category)	Name, address of other parties to the transaction
NONE		

3. Identify each business entity, nonprofit entity or union in which you, your spouse, or any of your dependent children was a partner, manager, officer, member of the board of directors, proprietor or beneficiary during the reporting period:

Name, address of business or nonprofit entity or union	Position held
LB MUSEUM OF SAN MARCOS, 131 North Guadalupe St. San Marcos TX 78666	PRESIDENT

4. Identify each business entity, nonprofit entity or union in which you, your spouse, or any of your dependent children had an ownership interest with a fair market value of more than \$100.00 at any time during the reporting period:

Name, address of business or nonprofit entity or union	Description of ownership interest (e.g., owner, partner, stockholder)	Value of ownership interest (by reporting category)	Number of shares held/ number of shares issued (if applicable)	Net gain or loss from sale of stock (by reporting category)
1 NONE				

5. Identify any real property in the City or ETJ in which you, your spouse, or any of your dependent children had an interest as owner, beneficial owner (holder of a mortgage), business owner (partner in a partnership; or board member, officer or owner of more than 5% of stock of a corporation), or a leaseholder:

Address or legal description	Name, address of owner(s) (if other than you, your spouse or children)	Fair market value (by reporting category) and present use	For leased property, annual rental amount (by reporting category)	Homestead exemption on this property?
517 W Hopkins St		III RESIDENCE		YES

6. Identify persons, business entities or guarantors to whom you, your spouse, or any of your dependent children owed a debt of more than \$100.00 during the reporting period (not including debts owed to persons related within the second degree of consanguinity or affinity, or loans to a political campaign which were reported as required by law):

Name, address of person, business entity or guarantor to which debt was owed	Amount of debt (by reporting category)	Amount of repayment during reporting period (by reporting category)
Velocity Credit Union P.O. Box Austin TX 78767	II	I
Broadway Bank 301 N. C.M. Allen Pkwy Austin TX 78767 San Marcos TX 78666	IV	I
CARDMEMBERSERVICE P.O. BOX 790408 St. Louis MO - 63179	I	I

7. Provided this information is not privileged by law, identify persons, business entities or guarantors who owed you, your spouse, or any of your dependent children a debt of more than \$100.00 during the reporting period (not including debts owed by persons related within the second degree of consanguinity or affinity:

Name, address of person, business entity or guarantor that owed the debt	Amount of debt (by reporting category)	Amount of repayment during reporting period (by reporting category)
NONE		

8. Identify the source of each gift or accumulation of gifts from one source of more than \$100.00 in value received during the reporting period by you, your spouse, or any of your dependent children, or received by another person for the use and benefit of you, your spouse, or any of your dependent children (not including 1) a gift received from a relative if given because of kinship, or 2) a gift received by will, by intestate succession or as distribution from an inter vivos or testamentary trust established by a spouse or ancestor):

Name, address of source of gift(s)	Description of gift(s)	Amount or value of gift(s) (by reporting category)
NONE		

9. Provided this information is not privileged by law, if you were the owner of 5% or more of any business entity during the reporting period, list all customers from whom the entity received at least ten per cent of its gross income during the reporting period:

Name, address of customer
NA

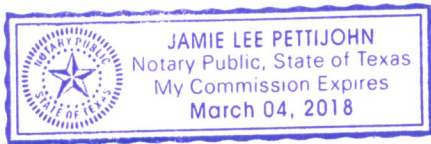
10. Identify any financial interest in any franchisee of the City held during the reporting period by you, your spouse, or any of your dependent children (note: franchise holders are A)Time Warner Cable, B) Pedernales Electric Cooperative, C) Bluebonnet Electric Cooperative, and D) CenterPoint Energy Entex):

Name of franchise holder	Description of financial interest held (stock, mortgage, note etc.)	Value of financial interest (by reporting category)
NA		

11. Identify any transaction during the reporting period by you, your spouse, or any of your dependent children with any holder of any franchise issued by the City, other than as a customer or patron:

Name of franchise holder	Description of transaction	Value of transaction (by reporting category)
NA		

AFFIDAVITI swear under penalty of perjury that the above statement is true and correct. I acknowledge that the disclosure applies to a family member (as defined by Section 176.001(2), Local Government Code) of this local government officer. I also acknowledge that this statement covers the 12-month period described by Section 176.003(a), Local Government Code.



Ed Mihalkanin
Signature of Local Government Officer/Appointed Official

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Ed Mihalkanin, this the 28th day of April, 20 17, to certify which, witness my hand and seal of office.

Samuel P. Hylle
Signature of officer administering oath

Jamie Lee Pettijohn
Printed name of officer administering oath

City Clerk
Title of officer administering oath